## Supervised Billing

### 9.103 Supervised Billing (2/22/18, GCR 17-073)

#### 9.103.1 Definitions

For the purposes of this rule, the term:

- (a) "Qualified Licensed Provider" means a provider who is licensed and enrolled in Vermont Medicaid and acting within his or her scope of practice.
- (b) "Qualified Non-Licensed Provider" means a provider that is actively working towards licensure as specified by his or her profession.
- (c) "Supervised Billing" means that a qualified licensed provider can bill for covered clinical services within his or her scope of practice provided by a qualified non-licensed provider when the qualified non-licensed provider is under direct supervision of the qualified licensed provider.

### 9.103.2 Qualified providers

- (a) A qualified licensed provider for purposes of this rule is:
  - (1) A physician or a licensed osteopathic physician certified in psychiatry by the American Board of Medical Specialties; or
  - (2) A psychiatric nurse practitioner; or
  - (3) A psychologist; or
  - (4) A marriage and family therapist; or
  - (5) A clinical mental health counselor; or
  - (6) A clinical social worker; or
  - (7) A Board Certified Applied Behavior Analyst; or
  - (8) An alcohol and drug counselor.
- (b) A qualified non-licensed provider for purposes of this rule is:
  - (1) A doctoral degree or master's degree level mental health practitioner, including clinical social workers, clinical mental health counselors, and marriage and family therapists, actively fulfilling post-degree supervised practice hours as outlined by the Office of Professional Regulation in the Office of the Secretary of State; or
  - (2) A psychiatric nurse practitioner actively fulfilling supervised practice hours as outlined by the Office of Professional Regulation in the Office of the Secretary of State; or
  - (3) A psychologist actively fulfilling supervised practice hours as outlined by the Office of Professional Regulation in the Office of the Secretary after receiving a doctoral or master's degree in psychology; or
  - (4) A master's degree level Applied Behavior Analyst actively fulfilling post-degree supervised practice hours as outlined by the Office of Professional Regulation in the Office of the Secretary of State; or
  - (5) An addiction counselor who is:
    - (A) A master-level addiction counselor actively fulfilling the required number of hours of supervised work experience providing alcohol/drug counseling services, commensurate with their degree as outlined by the Office of Professional Regulation in the Office of the Secretary of State; or

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- (B) In possession of (or will possess within 180 days of hire or up to the date of the second exam offered following hire) a Vermont Addiction Apprentice Professional certificate (AAP) and providing services within the restrictions required by the Office of Professional Regulation in the Office of the Secretary of State; or
- (C) In possession of an Alcohol and Drug Counselor (ADC) certification and providing services within the restrictions required by the Vermont Office of Professional Regulation.

# 9.103.3 Conditions for Supervised Billing

For a qualified licensed provider to bill for clinical services provided by a qualified non-licensed provider as supervised billing, the following conditions must be met:

- (a) The qualified licensed provider shall:
  - (1) Adhere to the supervision requirements specified by his or her scope of practice, including regular, face-to-face ongoing supervision to the qualified non-licensed provider; and
  - (2) Be available immediately in person or by phone within 15 minutes themselves or ensure that another qualified licensed provider operating within their scope of practice is available immediately in person or by phone within 15 minutes; and
  - (3) Sustain an active part in the ongoing care of the patient, including sign off on the treatment plan; and
  - (4) If the qualified non-licensed provider determines neuropsychological testing may be needed, perform a face-to-face assessment with the patient to determine if it is medically necessary and which tests should be ordered and administered.
- (b) The qualified non-licensed provider shall be actively working towards professional licensure or possess an AAP certification (or will possess within 180 days of hire or up to the date of the second exam offered following hire) or ADC; and
  - (1) For mental health practitioners, Applied Behavior Analysts, and addiction counselors, be listed on the roster that is maintained by the Office of Professional Regulation in the Office of the Secretary of State for his or her profession; or
  - (2) For Psychiatric Nurse Practitioners, be a registered nurse with a collaborative provider agreement as required by the Office of Professional Regulation in the Office of the Secretary of State.
- (c) Non-licensed providers described in subsection (b) above who have been on the roster that is maintained by the Office of Professional Regulation in the Office of the Secretary of State for more than five years after January 1, 2016 will no longer be eligible under Medicaid to provide clinical services.

## 9.103.4 Non-Reimbursable Services

- (a) Services rendered by any provider who is eligible to be enrolled as a Vermont Medicaid provider but has not applied to be a Vermont Medicaid provider.
- (b) Services performed by a non-licensed provider who cannot practice independently and is not actively working toward licensure.